

Minnesota's Medicaid Buy-In

Medical Assistance for Employed Persons with Disabilities (MA-EPD)

Established July 1999

MN Statute: 256(B).057, subd. 9



MA-EPD Goals

- The goal of the program is to establish a continuum of access, regardless of earnings, to the full range of medical, mental health and long term care benefits, and
- Promote competitive employment and the economic self-sufficiency of people with disabilities.

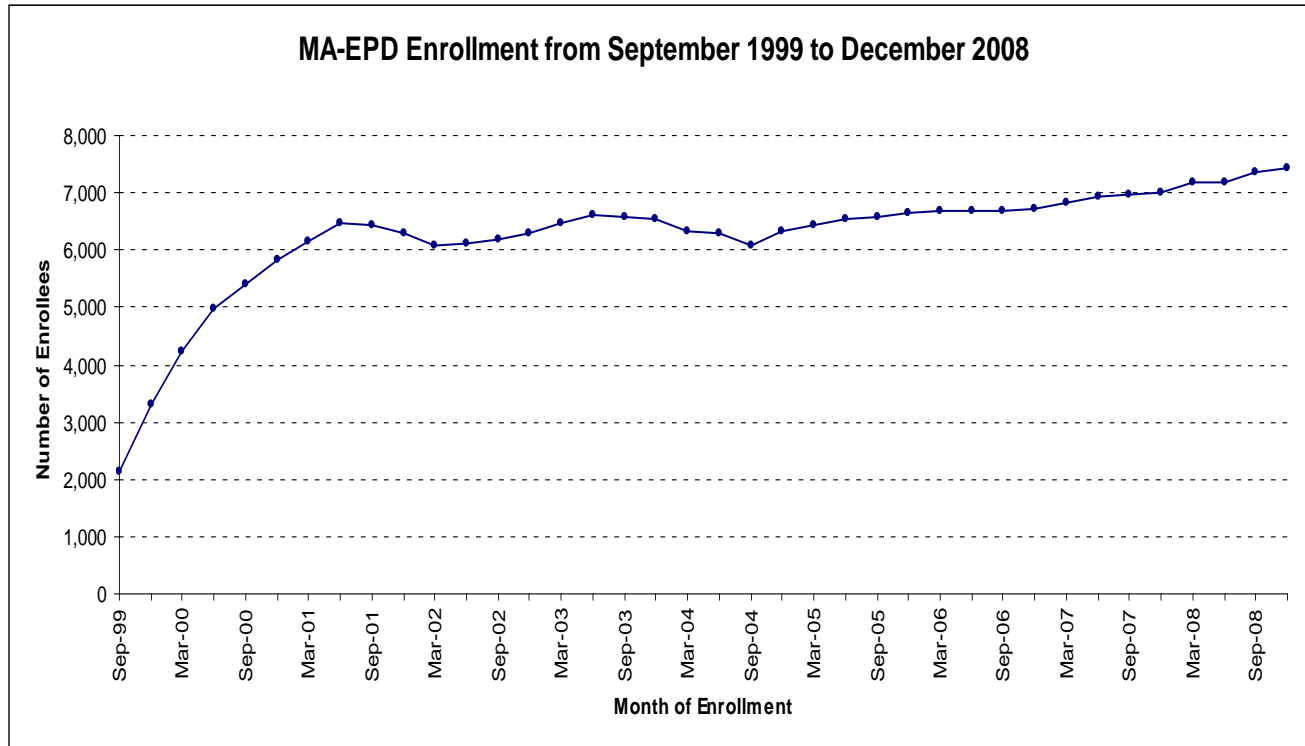


Background

- Eligibility:
 - Ages 16-64
 - Certified disabled by SSA or SMRT
 - Be employed
 - Meet the asset limit (\$20,000)
 - Pay a monthly premium
- Services Covered:
 - Comprehensive benefits under State Plan
 - MN provides almost every optional services
 - 40% of MA-EPD enrollees are on MN's four 1915(c) waivers (CADI, CAC, TBI, DD)



General Enrollment Data



Data Source: MMIS

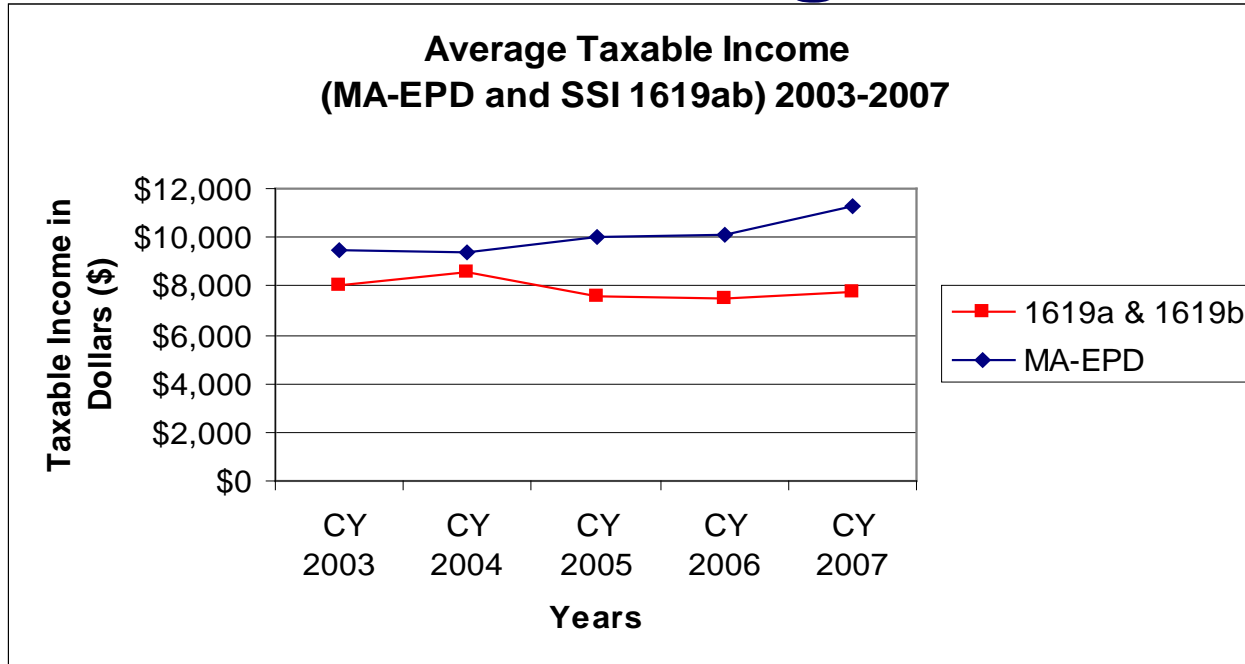


Demographics

	2002	2005	2008
Mental Health	28.2%	40.6%	35.9%
Physical, Sensory, Chronic/Long-Term Illness	53.4%	39.3%	43.2%
DD/RC	15.9%	17.5%	18.5%
TBI, HIV/AIDS	2.7%	2.5%	2.3%

Source: MMIS

Enrollee Earnings



Source: MN Dept. of Revenue

MA-EPD Average monthly earned income Q3 2009: \$541

Changes in MA-EPD Policy

	EARLY MA-EPD POLICY 1999	WORK INCENTIVE POLICY 2004
EARNED INCOME	<ul style="list-style-type: none">Total gross monthly earned income of \$1.00 or higher to qualify (No earned income requirements)	<ul style="list-style-type: none">\$65 earned income disregard (More than \$65 total gross monthly earned income to be eligible)Effective 1/01/04
PREMIUM PAYMENT	<ul style="list-style-type: none">Premium payment for individuals whose combined total monthly gross income meets or exceeds 100% FPG. Payments begin at \$7/month.Effective 11/01/01	<ul style="list-style-type: none">\$35 minimum premium payment for all enrollees using current premium structureEffective 1/01/04
UNEARNED INCOME OBLIGATION	<ul style="list-style-type: none">No additional fee tied to unearned income	<ul style="list-style-type: none">Enrollees must pay one-half of one percent of total monthly unearned incomeEffective 11/01/03

Changes in MA-EPD Policy

	EARLY MA-EPD POLICY 1999	WORK INCENTIVE POLICY 2004
TAX WITHHOLDING	<ul style="list-style-type: none">▪ Certain employers are exempt from withholding taxes (sheltered workshops and day activity centers)▪ Effective 11/01/01	<ul style="list-style-type: none">▪ To be considered employment, Social Security and Medicare taxes must be withheld▪ Effective 1/01/04
MEDICARE PART B	<ul style="list-style-type: none">▪ All Medicare Part B premiums reimbursed using State funds for enrollees not QMB/SLMB eligible (county reimburses enrollee, state reimburses county)	<ul style="list-style-type: none">▪ Medicare Part B premiums reimbursed only if enrollee is not eligible for QMB/SLMB and has total income at or below 200% FPG▪ Effective 11/01/03

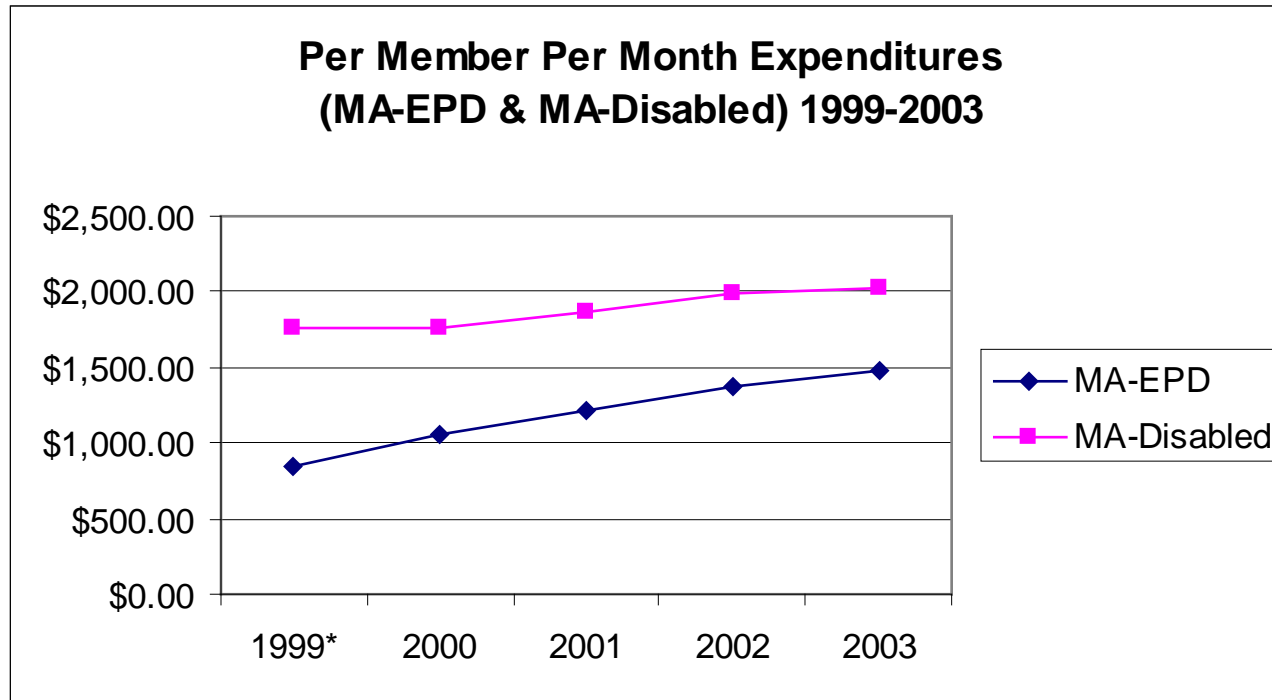


Compare: MA and MA-EPD

Name of Program	Income guidelines	Asset Guidelines	Work Requirement	Cost Sharing	Earned Income Disregards
Medical Assistance (MA)	100% FPG \$903 single \$1215 couple	\$ 3000 single \$ 6000 couple	None	MA with spend down (if above \$903 single, must spend down to 75% FPG = \$677 single)	First \$65 ½ of remaining
Medical Assistance for Employed Persons with Disabilities (MA-EPD)	No upper income limit	\$20,000 per individual; also excludes spouse's assets, retirement accounts, and medical expense accounts set up by an employer	Must be employed or self-employed, earning more than \$65 (average) monthly, and Medicare and Social Security taxes paid or withheld	Sliding fee scale premium based on income and household size. Minimum of \$35 Unearned income obligation (½% of gross unearned income)	First \$65

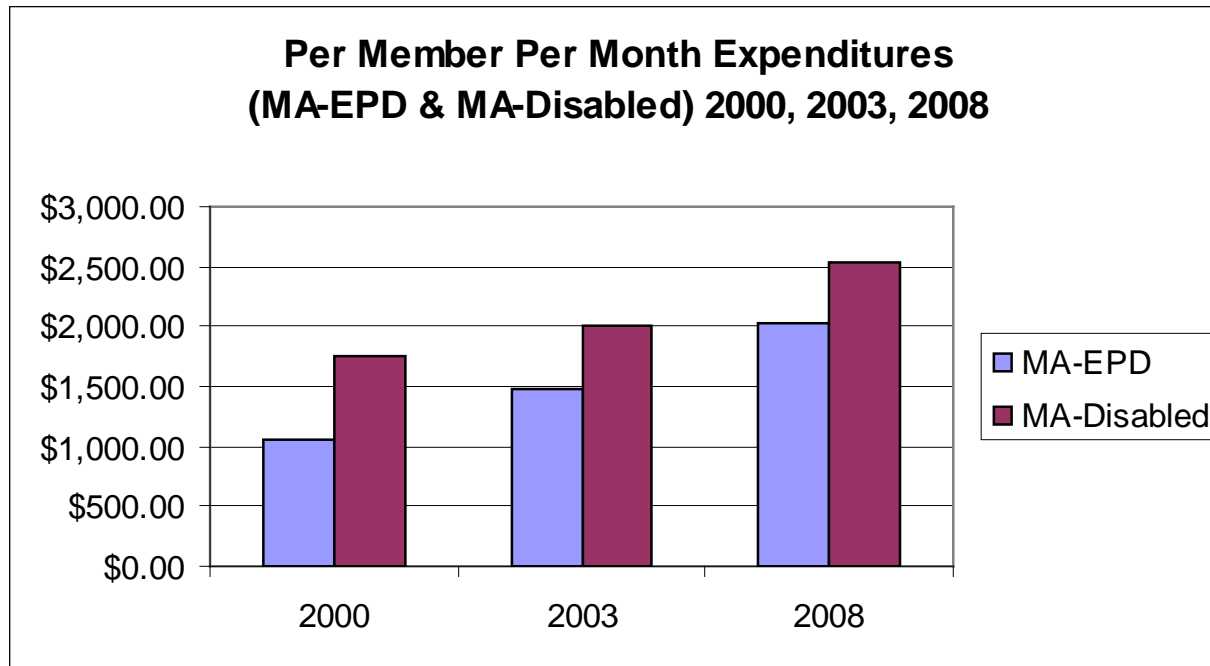


Expenditure Trends



Source: MMIS, DHS Data warehouse

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Source: MMIS, DHS Data warehouse

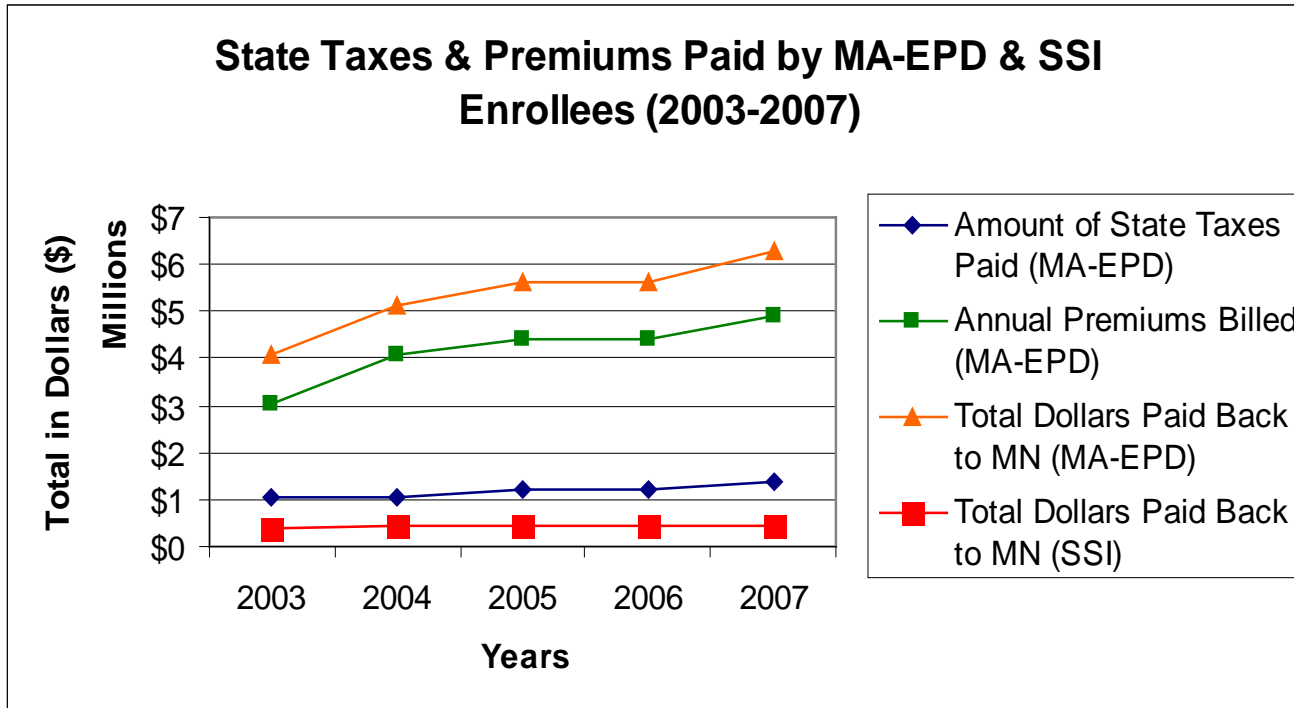
Expenditure Trends (2008)

Program	Total	PMPM Cost
SSI 1619(a)(b)	\$106 million	\$2,033
MA-EPD	\$177 million	\$2,036
MA-Disabled	\$2.3 billion	\$2,542

Source: MMIS, DHS Data warehouse



Taxes & Premiums



Source: MMIS, MN Dept. of Revenue, DHS Data warehouse

What's Next

- Maximize the use of the buy-in as a work incentive
- Generate revenue
- Integrate lessons from the Demonstration to Maintain Independence & Employment
 - “Paycheck therapy is better than talk therapy. I feel so much better when I am working. I really want to be a success story for this program.” – DMIE Enrollee



Further information

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[MA-EPD Statistical Information](#) [2005 MA-EPD Evaluation](#)

